

**FEC  
FORM 3****REPORT OF RECEIPTS  
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

12FE4M5

Forlini for US

ADDRESS (number and street)

39285 N. Blom

Check if different  
than previously  
reported. (ACC)

Harrison Township

MI

48045

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼**

C

C00609172

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

STATE ▼ DISTRICT

MI

10

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M /

D D /

Y Y Y Y

in the  
State of(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the  
State of

5. Covering Period

M M /

D D /

Y Y Y Y

through

M M /

D D /

Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Verkest, Kenneth, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Verkest, Kenneth, , ,

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y

10

19

2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

Office  
Use  
Only**FEC FORM 3**  
(Revised 05/2016)

# SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 2 / 25

Write or Type Committee Name  
Forlini for US

Report Covering the Period:

From:

M M / D D / Y Y Y Y  
04 / 01 / 2016

To:

M M / D D / Y Y Y Y  
06 / 30 / 2016

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	30210.00	58750.00
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	30210.00	58750.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	69833.17	71030.16
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	69833.17	71030.16
8. Cash on Hand at Close of Reporting Period (from Line 27).....	7719.84	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	20000.00	

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

PAGE 3 / 25

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

Forlini for US

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	1	6

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	6

**I. RECEIPTS**
**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date
**11. CONTRIBUTIONS (other than loans) FROM:****(a) Individuals/Persons Other Than Political Committees**

(i) Itemized (use Schedule A).....

12500.00

34600.00

(ii) Unitemized.....

4010.00

10450.00

(iii) TOTAL of contributions from individuals ▶

16510.00

45050.00

**(b) Political Party Committees.....**

0.00

0.00

**(c) Other Political Committees (such as PACs).....**

13700.00

13700.00

**(d) The Candidate.....**

0.00

0.00

**(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..**

30210.00

58750.00

**12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....**

0.00

0.00

**13. LOANS:****(a) Made or Guaranteed by the Candidate.....**

20000.00

20000.00

**(b) All Other Loans.....**

0.00

0.00

**(c) TOTAL LOANS (add Lines 13(a) and (b)).....**

20000.00

20000.00

**14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....**

0.00

0.00

**15. OTHER RECEIPTS (Dividends, Interest, etc.) .....**

0.00

0.00

**16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶**

50210.00

78750.00

**DETAILED SUMMARY PAGE**

FEC Form 3 (Revised 05/2016)

of Disbursements

PAGE 4 / 25

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	69833.17	71030.16
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	69833.17	71030.16

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	27343.01
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	50210.00
25. SUBTOTAL (add Line 23 and Line 24).....	77553.01
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	69833.17
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	7719.84

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 5 OF 25

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Forlini for US**

**A.** Full Name (Last, First, Middle Initial)  
**Aristeo, Joseph, , ,**

Mailing Address 12811 Farmington

City Livonia State MI Zip Code 48170

FEC ID number of contributing federal political committee. **C**

Name of Employer Aristeo Construction Occupation Contractor

Receipt For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 17 2016

Transaction ID : SA11AI.4384

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Bitonti, William, , ,**

Mailing Address 28026 Norcross

City Harrison Twp. State MI Zip Code 48045

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 13 2016

Transaction ID : SA11AI.4337

Amount of Each Receipt this Period

150.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Brenzler, Harold, , ,**

Mailing Address 51696 Colonial

City Shelby Twp. State MI Zip Code 48316

FEC ID number of contributing federal political committee. **C**

Name of Employer Square Deal Bldg. Supply Occupation Gen. Manager

Receipt For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 17 2016

Transaction ID : SA11AI.4396

Amount of Each Receipt this Period

2000.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

3150.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER:  
(check only one)

PAGE 6 OF 25

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Forlini for US**

**A.** Full Name (Last, First, Middle Initial)  
**Brown-Askar, Kay, , ,**  
Mailing Address 39894 Memory Lane

City State Zip Code  
Harrison Twp. MI 48045

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 11 2016

Transaction ID : SA11AI.4343

Amount of Each Receipt this Period

250.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Ciraulo, Giovanni, , ,**  
Mailing Address 39680 East River Ct.

City State Zip Code  
Clinton Twp. MI 48038

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Memphis Drugs

Occupation  
Pharmacist

Receipt For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
2700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 17 2016

Transaction ID : SA11AI.4400

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Ciraulo, Sheri, , ,**  
Mailing Address 7670 19 Mile Rd.

City State Zip Code  
Sterling Hgts. MI 48314

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Utica Community Schools

Occupation  
Teacher

Receipt For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
2250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 17 2016

Transaction ID : SA11AI.4394

Amount of Each Receipt this Period

2250.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

5200.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER:  
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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
Forlini for US

**A.** Full Name (Last, First, Middle Initial)  
Forlini, Anthony, , ,

Mailing Address 19529 Dixie

City Clinton Twp.	State MI	Zip Code 48035
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. C

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 17 / 2016

Transaction ID : SA11AI.4406

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
Jaskiewicz, Slawomir, , ,

Mailing Address 6505 Auburn

City Utica	State MI	Zip Code 48317
---------------	-------------	-------------------

FEC ID number of contributing federal political committee. C

Name of Employer MGA Roofing	Occupation Owner
---------------------------------	---------------------

Receipt For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 05 / 2016

Transaction ID : SA11AI.4345

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
Lore, Salvatore, , ,

Mailing Address 13428 Lakeview

City Shelby Twp.	State MI	Zip Code 48315
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. C

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
2700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 17 / 2016

Transaction ID : SA11AI.4398

Amount of Each Receipt this Period

2700.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

3450.00

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Forlini for US**

**A.** Full Name (Last, First, Middle Initial)  
**Rose, Roy, , ,**  
Mailing Address 55620 Woodridge Dr.

City State Zip Code  
Shelby Twp. MI 48316

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Anderson, Eckstein, & Westrick

Occupation  
Civil Engineer

Receipt For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 12 2016

Transaction ID : SA11AI.4355

Amount of Each Receipt this Period

150.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Rossman, Barbara, , ,**  
Mailing Address 54311 Queensborough

City State Zip Code  
Shelby Twp. MI 48315

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Henry Ford Macomb Hospital

Occupation  
CEO

Receipt For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 27 2016

Transaction ID : SA11AI.4423

Amount of Each Receipt this Period

300.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**Vonk, Donald, , ,**  
Mailing Address 32900 N. River Rd.

City State Zip Code  
Harrison Twp. MI 48045

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 22 2016

Transaction ID : SA11AI.4335

Amount of Each Receipt this Period

250.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

700.00

12500.00



**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Forlini for US**

**A.** Full Name (Last, First, Middle Initial)  
**Intl Union of Operating Eng Local 324 PAC**

Mailing Address 500 Hulet Dr.

City	State	Zip Code
Bloomfield Twp.	MI	48302

FEC ID number of contributing  
federal political committee.**C** C00093989

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		22		2016

Transaction ID : SA11C.4556

Amount of Each Receipt this Period

5000.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**Intl Union of Operating Eng Local 324 PAC**

Mailing Address 500 Hulet Dr.

City	State	Zip Code
Bloomfield Twp.	MI	48302

FEC ID number of contributing  
federal political committee.**C** C00093989

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06		22		2016

Transaction ID : SA11C.4558

Amount of Each Receipt this Period

5000.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**NTSAA PAC**

Mailing Address 4245 N. Fairfax Dr. Ste. 750

City	State	Zip Code
Arlington	VA	22203

FEC ID number of contributing  
federal political committee.**C** C00515049

Name of Employer

Occupation

Receipt For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2700.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		30		2016

Transaction ID : SA11C.4438

Amount of Each Receipt this Period

2700.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶

12700.00

**TOTAL** This Period (last page this line number only)..... ▶

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 10 OF 25

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)  
Forlini for US

<b>A.</b> Full Name (Last, First, Middle Initial) Pipefitters PAC			Date of Receipt M M / D D / Y Y Y Y Y 06 / 22 / 2016		
Mailing Address 30100 Northwestern Hwy.			Transaction ID : SA11C.4439		
City Farmington Hills	State MI	Zip Code 48334	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C C00129627		Memo Item <input type="checkbox"/>			
Name of Employer Occupation		Election Cycle-to-Date 1000.00			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date 1000.00			
<b>B.</b> Full Name (Last, First, Middle Initial)			Date of Receipt M M / D D / Y Y Y Y Y		
Mailing Address			Amount of Each Receipt this Period		
City	State	Zip Code	Memo Item <input type="checkbox"/>		
FEC ID number of contributing federal political committee. C		Election Cycle-to-Date			
Name of Employer Occupation		Election Cycle-to-Date			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date			
<b>C.</b> Full Name (Last, First, Middle Initial)			Date of Receipt M M / D D / Y Y Y Y Y		
Mailing Address			Amount of Each Receipt this Period		
City	State	Zip Code	Memo Item <input type="checkbox"/>		
FEC ID number of contributing federal political committee. C		Election Cycle-to-Date			
Name of Employer Occupation		Election Cycle-to-Date			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date			
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			1000.00		
<b>TOTAL</b> This Period (last page this line number only)..... ▶			13700.00		

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 11 OF 25

☐ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☒ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)  
**Forlini for US**

**A.** Full Name (Last, First, Middle Initial)  
**Forlini, Anthony, G., ,**

Mailing Address 39273 Chart

City Harrison Township State MI Zip Code 48045

FEC ID number of contributing federal political committee. **C** H6MI10219

Name of Employer State of Michigan Occupation State Representative

Receipt For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 20100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 06 / 06 / 2016

Transaction ID : SA13A.4420

Amount of Each Receipt this Period

20000.00

☐ Memo Item  
☐ Loan

**B.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶

**TOTAL** This Period (last page this line number only)..... ▶

20000.00  
 20000.00

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 12 OF 25

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Forlini for US**

Full Name (Last, First, Middle Initial)

**A. 21st Century Media**

Mailing Address 19176 Hall Rd

Date of Disbursement

M M	D D	Y Y Y Y
05	16	2016

City  
Clinton Twp.State  
MIZip Code  
48038

FEC Identification Number

C

Purpose of Disbursement  
Newspaper Ad

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1110.00

Transaction ID : SB17.4489

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**B. American Speedy Printing**

Mailing Address 46723 Van Dyke

Date of Disbursement

M M	D D	Y Y Y Y
06	27	2016

City  
UticaState  
MIZip Code  
48317

FEC Identification Number

C

Purpose of Disbursement  
Postcard Printing

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

371.00

Transaction ID : SB17.4537

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**C. Buddys Pizza**

Mailing Address 45841 Hayes

Date of Disbursement

M M	D D	Y Y Y Y
05	11	2016

City  
MacombState  
MIZip Code  
48044

FEC Identification Number

C

Purpose of Disbursement  
Pizza & Politics Food

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

255.28

Transaction ID : SB17.4485

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....▶

1736.28

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)  
Forlini for US

Full Name (Last, First, Middle Initial)

**A. C & G Newspapers**

Mailing Address 13650 11 Mile Rd.

City  
WarrenState  
MIZip Code  
48089Purpose of Disbursement  
Newspaper Ad

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	2		2	0	1	6

FEC Identification Number

C

Amount of Each Disbursement this Period

835.00

Transaction ID : SB17.4474

☐ Memo Item**B. Combat Data**

Mailing Address 13262 Blaisdell

City  
DeWittState  
MIZip Code  
48820Purpose of Disbursement  
Tele Town Hall

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	4		2	0	1	6

FEC Identification Number

C

Amount of Each Disbursement this Period

2920.18

Transaction ID : SB17.4451

☐ Memo Item**c. Combat Data**

Mailing Address 13262 Blaisdell

City  
DeWittState  
MIZip Code  
48820Purpose of Disbursement  
Tele Town Hall

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	4		2	0	1	6

FEC Identification Number

C

Amount of Each Disbursement this Period

1238.89

Transaction ID : SB17.4453

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

4994.07

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)  
Forlini for US

Full Name (Last, First, Middle Initial)

**A. Combat Data**

Mailing Address 13262 Blaisdell

City  
DeWittState  
MIZip Code  
48820Purpose of Disbursement  
Tele Town Hall

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	5		2	0	1	6

FEC Identification Number

C

Amount of Each Disbursement this Period

1238.89

Transaction ID : SB17.4478

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Combat Data**

Mailing Address 13262 Blaisdell

City  
DeWittState  
MIZip Code  
48820Purpose of Disbursement  
Tele Town Hall

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	2		2	0	1	6

FEC Identification Number

C

Amount of Each Disbursement this Period

225.00

Transaction ID : SB17.4511

☐ Memo Item

Full Name (Last, First, Middle Initial)

**c. Combat Data**

Mailing Address 13262 Blaisdell

City  
DeWittState  
MIZip Code  
48820Purpose of Disbursement  
Phone Services

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	1		2	0	1	6

FEC Identification Number

C

Amount of Each Disbursement this Period

175.00

Transaction ID : SB17.4548

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1638.89

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 15 OF 25

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Forlini for US

Full Name (Last, First, Middle Initial)

**A. Edwards Marketing**

Mailing Address 23001 Alger

Date of Disbursement

M M / D D / Y Y Y Y
06 / 07 / 2016

City  
St. Clair ShoresState  
MIZip Code  
48080Purpose of Disbursement  
Video Editing

FEC Identification Number

C

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB17.4514

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**B. Edwards Marketing**

Mailing Address 23001 Alger

Date of Disbursement

M M / D D / Y Y Y Y
06 / 22 / 2016

City  
St. Clair ShoresState  
MIZip Code  
48080Purpose of Disbursement  
Video Services

FEC Identification Number

C

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

2050.00

Transaction ID : SB17.4535

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**C. Edwards Marketing**

Mailing Address 23001 Alger

Date of Disbursement

M M / D D / Y Y Y Y
06 / 30 / 2016

City  
St. Clair ShoresState  
MIZip Code  
48080Purpose of Disbursement  
Video Services

FEC Identification Number

C

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1300.00

Transaction ID : SB17.4555

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....▶

4350.00

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 16 OF 25

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Forlini for US

Full Name (Last, First, Middle Initial)

**A. Espresso Machine Experts**

Mailing Address 48826 Van Dyke

Date of Disbursement

M M	D D	Y Y Y Y
04	25	2016

City  
Shelby Twp.State  
MIZip Code  
48317

FEC Identification Number

C

Purpose of Disbursement  
Espresso Machine Rental

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

700.00

Transaction ID : SB17.4560

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**B. Immaculate Conception Family Festival**

Mailing Address 9764 Dixie Hwy

Date of Disbursement

M M	D D	Y Y Y Y
04	14	2016

City  
Ira Twp.State  
MIZip Code  
48023

FEC Identification Number

C

Purpose of Disbursement  
Ticket Sponsorship

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.4454

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**C. Innovative Public Affairs**

Mailing Address 1120 Greenleaf

Date of Disbursement

M M	D D	Y Y Y Y
06	22	2016

City  
Royal OakState  
MIZip Code  
48067

FEC Identification Number

C

Purpose of Disbursement  
Consulting Services

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

2100.00

Transaction ID : SB17.4541

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....▶

3300.00

**TOTAL** This Period (last page this line number only).....▶



**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 17 OF 25

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Forlini for US**

Full Name (Last, First, Middle Initial)

**A. Italian American Cultural Society**

Mailing Address 43843 Romeo Plank

Date of Disbursement

M M	D D	Y Y Y Y
06	29	2016

City	State	Zip Code
Clinton Twp.	MI	48038

FEC Identification Number

C

Purpose of Disbursement  
Festival Sponsorship

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

300.00

Transaction ID : SB17.4553

☐ Memo Item

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. Manhattan Mailers**

Mailing Address 51132 Milano

Date of Disbursement

M M	D D	Y Y Y Y
04	28	2016

City	State	Zip Code
Macomb	MI	48042

FEC Identification Number

C

Purpose of Disbursement  
Printing & Mailing

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

556.30

Transaction ID : SB17.4470

☐ Memo Item

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**c. McKee, Kyle, , ,**

Mailing Address 5 Belleview

Date of Disbursement

M M	D D	Y Y Y Y
06	20	2016

City	State	Zip Code
Mt. Clemens	MI	48043

FEC Identification Number

C

Purpose of Disbursement  
Compensation

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.4526

☐ Memo Item

Office Sought:	House	Disbursement For: 2016
	Senate	
	President	
		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify) ▼

State: District:

**SUBTOTAL** of Disbursements This Page (optional).....▶

1356.30

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 18 OF 25

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Forlini for US**

Full Name (Last, First, Middle Initial)

**A. Palazzo Grande**

Mailing Address 54660 Van Dyke

Date of Disbursement

M M	D D	Y Y Y Y
04	18	2016

City  
Shelby Twp.State  
MIZip Code  
48315Purpose of Disbursement  
Fundraiser Hall (dnpymt.)

FEC Identification Number

C

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

600.00

Transaction ID : SB17.4461

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**B. Palazzo Grande**

Mailing Address 54660 Van Dyke

Date of Disbursement

M M	D D	Y Y Y Y
05	23	2016

City  
Shelby Twp.State  
MIZip Code  
48315Purpose of Disbursement  
Fundraiser Food, Drinks, Hall Rent

FEC Identification Number

C

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

2373.30

Transaction ID : SB17.4496

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**C. Pontiac Mailing Service**

Mailing Address 2627 Pontiac Lake Rd.

Date of Disbursement

M M	D D	Y Y Y Y
06	21	2016

City  
WaterfordState  
MIZip Code  
48328Purpose of Disbursement  
Postage & Mailing

FEC Identification Number

C

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

5769.87

Transaction ID : SB17.4533

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....▶

8743.17

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 19 OF 25

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)  
**Forlini for US**

Full Name (Last, First, Middle Initial)

**A. Pontiac Mailing Service**

Mailing Address 2627 Pontiac Lake Rd.

Date of Disbursement

M M / D D / Y Y Y Y
06 / 27 / 2016

City  
WaterfordState  
MIZip Code  
48328Purpose of Disbursement  
Postage & Mailing

FEC Identification Number

C

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

4285.42

Transaction ID : SB17.4536

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**B. Printing by Johnson**

Mailing Address 1430 S. Gratiot

Date of Disbursement

M M / D D / Y Y Y Y
05 / 09 / 2016

City  
Mt. ClemensState  
MIZip Code  
48043Purpose of Disbursement  
Sticky Notes & Banners

FEC Identification Number

C

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

1058.76

Transaction ID : SB17.4481

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**C. RK Graphics**

Mailing Address 18229 N. Nunneley

Date of Disbursement

M M / D D / Y Y Y Y
06 / 15 / 2016

City  
Clinton Twp.State  
MIZip Code  
48036Purpose of Disbursement  
Printing - Pens

FEC Identification Number

C

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

443.43

Transaction ID : SB17.4524

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

**SUBTOTAL** of Disbursements This Page (optional).....▶

5787.61

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 20 OF 25

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)  
Forlini for US

Full Name (Last, First, Middle Initial)

**A. Sawicki & Son**

Mailing Address 1521 W. Lafayette

City  
DetroitState  
MIZip Code  
48216Purpose of Disbursement  
Yard Signs

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		13		2016

FEC Identification Number

C

Amount of Each Disbursement this Period

2027.25

Transaction ID : SB17.4522

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Sign-A-Rama**

Mailing Address 36886 Harper

City  
Clinton Twp.State  
MIZip Code  
48035Purpose of Disbursement  
Lawn Signs

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		14		2016

FEC Identification Number

C

Amount of Each Disbursement this Period

1457.50

Transaction ID : SB17.4559

☐ Memo Item

Full Name (Last, First, Middle Initial)

**c. St. Clair County GOP**

Mailing Address P.O. Box 611695

City  
Port HuronState  
MIZip Code  
48061Purpose of Disbursement  
Event Ticket

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		28		2016

FEC Identification Number

C

Amount of Each Disbursement this Period

50.00

Transaction ID : SB17.4473

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

3534.75

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 21 OF 25

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)  
**Forlini for US**

Full Name (Last, First, Middle Initial)

**A. The Prosper Group**

Mailing Address 435 E. Main sT.

City  
gREENWOODState  
INZip Code  
46143Purpose of Disbursement  
Digital Advertising

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		16		2016

FEC Identification Number

C

Amount of Each Disbursement this Period

10000.00

Transaction ID : SB17.4487

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. The Prosper Group**

Mailing Address 435 E. Main sT.

City  
gREENWOODState  
INZip Code  
46143Purpose of Disbursement  
Digital Advertising

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		08		2016

FEC Identification Number

C

Amount of Each Disbursement this Period

15310.00

Transaction ID : SB17.4517

☐ Memo Item

Full Name (Last, First, Middle Initial)

**c. Triangle Printing**

Mailing Address 30520 Gratiot

City  
RosevilleState  
MIZip Code  
48066Purpose of Disbursement  
Letters & Envelopes

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
04		25		2016

FEC Identification Number

C

Amount of Each Disbursement this Period

424.00

Transaction ID : SB17.4468

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

25734.00

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 22 OF 25

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Forlini for US

Full Name (Last, First, Middle Initial)

**A. Triangle Printing**

Mailing Address 30520 Gratiot

City  
RosevilleState  
MIZip Code  
48066Purpose of Disbursement  
Printing - Brochures

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		07		2016

FEC Identification Number

C

Amount of Each Disbursement this Period

413.40

Transaction ID : SB17.4516

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Triangle Printing**

Mailing Address 30520 Gratiot

City  
RosevilleState  
MIZip Code  
48066Purpose of Disbursement  
Postcard Printing

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		10		2016

FEC Identification Number

C

Amount of Each Disbursement this Period

339.20

Transaction ID : SB17.4520

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. U.S.P.S.**

Mailing Address 155 S. Main St.

City  
Mt. ClemensState  
MIZip Code  
48043Purpose of Disbursement  
Postage

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		09		2016

FEC Identification Number

C

Amount of Each Disbursement this Period

162.40

Transaction ID : SB17.4519

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

915.00

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 23 OF 25

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)  
**Forlini for US**

Full Name (Last, First, Middle Initial)

**A. U.S.P.S.**

Mailing Address 155 S. Main St.

City  
Mt. ClemensState  
MIZip Code  
48043Purpose of Disbursement  
Postage

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
06	10	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

58.00

Transaction ID : SB17.4521

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Weiss, Pam, , ,**

Mailing Address 5 Belleview

City  
Mt. ClemensState  
MIZip Code  
48043Purpose of Disbursement  
Compensation

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
05	10	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

1500.00

Transaction ID : SB17.4483

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Weiss, Pam, , ,**

Mailing Address 5 Belleview

City  
Mt. ClemensState  
MIZip Code  
48043Purpose of Disbursement  
Compensation

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
05	31	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

2700.00

Transaction ID : SB17.4505

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

4258.00

**TOTAL** This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 24 OF 25

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Forlini for US

Full Name (Last, First, Middle Initial)

**A.** Weiss, Pam, , ,

Mailing Address 5 Belleview

City  
Mt. ClemensState  
MIZip Code  
48043Purpose of Disbursement  
Compensation

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		22		2016

FEC Identification Number

C

Amount of Each Disbursement this Period

1500.00

Transaction ID : SB17.4543

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1500.00

**TOTAL** This Period (last page this line number only).....▶

67848.07



**SCHEDULE C (FEC Form 3)**  
**LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 25 OF 25

FOR LINE NUMBER:  
(check only one)☒ 13a  
☐ 13bNAME OF COMMITTEE (In Full)  
Forlini for US

Transaction ID : SC/10.4420

**LOAN SOURCE** Full Name (Last, First, Middle Initial)☐ Memo Item

Forlini, Anthony, G., ,

Election: 2016

☒ Primary☐ General☐ Other (specify) ▼Mailing Address  
39273 Chart

City

Harrison Township

State

MI

ZIP Code

48045

☒ Personal Funds of the Candidate

Original Amount of Loan

20000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

20000.00

**TERMS**

Date Incurred

Date Due

Interest Rate  
(If none, enter 0)

Secured:

M 06 M

D 06 D

Y 2016 Y

M M

D D

Y 1/1/2020 Y

0.00 % (apr)

☐ Yes ☒ No

## List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional).....▶

20000.00

**TOTALS** This Period (last page in this line only).....▶

20000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.